

APPLICATION FOR TENNESSEE TEACHING LICENSE OR AMENDMENT TO LICENSURE

PART I RECORD OF PREPARATION TO BE COMPLETED BY APPLICANT (type/print)

If you hold or have previously held a Tennessee Teacher's License, please indicate Reference Number _____

Last Name	First Name	Middle/Maiden			
Social Security Number	Telephone Number		Date of Birth	*Sex	*Race
Street/P.O. Box	City		State	Zip Code	

Optional *Statistical information only

- ____ APPLICATION FOR INITIAL TEACHING LICENSE
- ____ APPLICATION FOR NON-PUBLIC SCHOOL TEACHING LICENSE (employment verification required)
- ____ APPLICATION FOR AMENDMENT TO ADD ADDITIONAL ENDORSEMENT AREA(S)
- ____ APPLICATION FOR AMENDMENT TO SHOW ADDITIONAL DEGREE/EDUCATION(check one of the following)

- ____ Master's Degree ____ Master's Degree plus 30
- ____ Education Specialist Degree ____ Doctorate Degree

____ **ADVANCE FROM INTERIM B TO FULL LICENSE**

(Praxis scores must be submitted to advance)

- ____ Designated Institution Score Report submitted by college/university
- ____ directly from ETS

____ **ADVANCE FROM ALTERNATIVE E TO FULL LICENSE**

- ____ Documentation signed by the college certification office verifying completion of the professional education component of an approved teacher education program AND
- ____ Passing scores on all appropriate Praxis Exams, including the PLT and all required specialty area tests AND
- ____ Designated Institution Score Report submitted by college/university
- ____ directly from ETS
- ____ Verification of two years successful teaching experience on the Alternative E License with a positive recommendation from the local school system AND
- ____ Official transcripts from all colleges/universities attended. All transcripts that have not previously been submitted to the Office of Teacher Licensing must be included.

- ____ **NAME/ADDRESS CHANGE** (provide a notarized copy of the marriage license, divorce decree, or court order that has generated the legal change of name)

PLEASE READ CAREFULLY BEFORE SIGNING

Effective July 24, 2002 **ALL** licensing transactions require an answer to the following question:

If you have NEVER held any type of Tennessee Teacher License or Tennessee Teacher Permit.

Are you addicted to the use of intoxicants or narcotics, have you ever been convicted of a felony (including a conviction plea of nolo contendere), or have you ever falsified or altered documentation required for licensure?

____ YES ____ NO

If you answered yes, please provide documentation to explain.

All information enclosed with this packet is correct. I understand that the penalty for falsifying information to obtain a license is denial of that license.

Signature _____ Date _____

If you have EVER held a Tennessee Teacher License or Tennessee Teacher Permit.

Since your license was last issued or renewed have you ever been convicted of a felony (including a conviction plea of nolo contendere), used narcotics or intoxicants improperly, been convicted of possessing narcotics, falsified documentation required for licensure, or altered your license or certificate?

____ YES ____ NO

If you answered yes, please provide documentation to explain.

All information enclosed with this packet is correct. I understand that the penalty for falsifying information to obtain a license is revocation of that license.

Signature _____ Date _____

TENNESSEE DEPARTMENT OF EDUCATION

Office of Teacher Licensing
5th floor, Andrew Johnson Tower
710 James Robertson Parkway
Nashville TN 37243-0377
(615) 532-4885

Part II TO BE COMPLETED BY INSTITUTION FOR ADD-ON ENDORSEMENT**For Add-On Endorsement Indicate:**

1. Add-On Endorsement _____
 2. Endorsement Code _____
 3. Date of Completion _____
 4. Hours Completed _____
- Certification Officer _____ Institution _____

Part III TO BE COMPLETED BY INSTITUTION FOR APPROVED PROGRAM OR ADD-ON PROGRAM**A. APPROVED PROGRAM OR ADD-ON PROGRAM**

Check One: _____ Approved Program completed _____ Add-On Program completed

For Approved Program Completion Indicate:

1. Program Completed _____
2. Endorsement Code(s) _____
3. Date of Completion _____

For Add-On Program Completion Indicate:

1. Add-On Program Completed _____
2. Endorsement Code(s) _____
3. Date of Completion _____

Certification Officer _____ Institution _____

B. PRACTICAL EXPERIENCE (for program completion)

_____ Enhanced Student Teaching _____ Internship
_____ Teaching Experience (verification must be enclosed with application)

C. PRAXIS REQUIREMENTS (Official Praxis scores must be enclosed with this application)

**** (Note: The Office of Teacher Licensing will accept the Designated Institution Score Report submitted by the college/university or scores sent directly from ETS) ****

Praxis Test	Score	Date	Specialty Area Code	Score	Date
PRINCIPLES OF LEARNING & TEACHING K-6			SPECIALTY TEST #		
PRINCIPLES OF LEARNING & TEACHING 5-8			SPECIALTY TEST #		
PRINCIPLES OF LEARNING & TEACHING 7-12			SPECIALTY TEST #		
			SPECIALTY TEST #		
			SPECIALTY TEST #		

- D. I certify that the above stated individual is at least 18 years of age, possesses good moral character, and is free from chemical addiction which would impair effectiveness as a teacher. This applicant has satisfactorily completed the approved teacher education program in the specified area(s) of endorsement, has NTE/PRAXIS test scores meeting minimum license requirements and is recommended as having adequate teaching competencies in the certified area.

Degree(s)	Date Degree(s) Conferred	Recommending Institution
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Dean of Education

Certification Officer

Date

Date

Application must be accompanied by A COMPLETE SET OF OFFICIAL TRANSCRIPTS documenting the recommendation for certification.

ENDORSEMENT TITLES AND CODES

Administrator Begin. PreK-12 (A)	480	Lib Info Spec PreK-12	473
Administrator Begin. PreK-12 (B)	481	Marketing	472
Administrator Prof. PreK-12	482	Mathematics	413
Administrator Prof. PreK-12	483	Music (Inst K-12)	429
Agriscience	449	Music (Vocal/Gen K-12)	428
Basic Business/Acctg. 7-12	430	Office Tech 7-12	435
Bible	026	Physical Ed K-12	420
Biology	415	Physics 7-12	417
Business Education	474	Spec Ed (Comp K-12)	461
Business Technology	475	Physics 9-12	414
Care/Gdce Child 9-12	451	Psychology 9-12	426
Chemistry	416	Russian PreK-12	494
Cloth Mgt Prod 9-12	452	Russian	406
Cons/Homemaking 5-12	450	School Counselor PreK-12	487
Coop Coordinator	104	School Psy PreK-12	489
Data Processing 7-12	434	School Social Worker	488
Driver Education	082	Shorthand 7-12	433
Earth Science	418	Sociology 9-12	425
Economics 7-12	424	Spanish	409
English	407	Spec Ed (Vision PreK-12)	462
ESL PreK-12	490	Spec Ed (Hear PreK-12)	463
Food Mtg Prod 9-12	453	Spec Ed (Sp/Lang PreK-12)	498
Foreign Lang (Other) 7-12	404	Spec Ed (Early Ch PreK-1)	465
Foreign Lang (Other) PreK-12	496	Superintendent	090
French	411	Supv of Attendance	094
French PreK-12	491	Supv of Materials	106
Geography 7-12	422	Tech Ed 5-12	470
German	412	Theatre K-12	405
German PreK-12	492	Typewriting/Key Bd 1-6	431
Government 7-12	423	Spec Teach Reading K-8	075
Grades 1-8	401	Spec Teach Reading 7-12	076
Grades 5-8 Middle Grades	400	Spanish PreK-12	495
Grades K-8	402	Speech Commun 7-12	408
Grades PreK-3 Early Childhood	403	Spec Ed (Modif K-12)	460
Grades PreK-4 Early Childhood	497	Typewriting/Key Bd 7-12	432
Health K-12	419	Visual Arts K-12	427
History 7-12	421	Voc Agriculture	448
Latin	410		
Latin PreK-12	493		

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